

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000004712

FILED
Apr 20, 2006
Secretary of State

Entity Name: ROLANDO SOMARRIBA D.D.S. INC.

Current Principal Place of Business:

10404 WEST FLAGLER ST. #8
MIAMI, FL 33174

New Principal Place of Business:

10404 WEST FLAGLER ST.
8
MIAMI, FL 33174

Current Mailing Address:

10404 WEST FLAGLER ST. #8
MIAMI, FL 33174

New Mailing Address:

10404 WEST FLAGLER ST.
8
MIAMI, FL 33174

FEI Number: 65-0465512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOMARRIBA, ROLANDO
10404 WEST FLAGLER ST.
#8
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOMARRIBA, ROLANDO
Address: 10404 W. FLAGLER ST.
City-St-Zip: MIAMI, FL 33174

Title: VD () Delete
Name: SOMARRIBA, BLANCA
Address: 10404 W. FLAGLER ST.
City-St-Zip: MIAMI, FL 33174

Title: TD () Delete
Name: SOMARRIBA, LAURA
Address: 10404 W. FLAGLER ST.
City-St-Zip: MIAMI, FL 33174

Title: SD () Delete
Name: SOMARRIBA, ROXANA
Address: 10404 W. FLAGLER ST.
City-St-Zip: MIAMI, FL 33174

Title: M () Delete
Name: SOMARRIBA, CARLOS
Address: 10404 W. FLAGLER STREET
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS SOMARRIBA

M

04/20/2006

Electronic Signature of Signing Officer or Director

_____ Date